

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	11/16
FORMALITY REVIEW	EW	564949	12/20/10
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted

N Non-elected
 I Intergrate
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	12-23-10
2	✓	✓	12-23-10
3	✓	✓	12-23-10
4	✓	✓	12-23-10
5	✓	✓	12-23-10
6	✓	✓	12-23-10
7	✓	✓	12-23-10
8	✓	✓	12-23-10
9	✓	✓	12-23-10
10	✓	✓	12-23-10
11	✓	✓	12-23-10
12	✓	✓	12-23-10
13	✓	✓	12-23-10
14	✓	✓	12-23-10
15	✓	✓	12-23-10
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47	✓	✓	12-23-10
48	✓	✓	12-23-10
49	✓	✓	12-23-10
50	✓	✓	12-23-10

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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